PAGE 1 / 10 =

FEC FORM 1			GANIZ/											
1. NAME OF		(Ched	ck if name	Example	e: If typing, t	уре	12F	E4M!		ice Use	Only			—
COMMITTEE (in	r full)	is cha	anged)	over the	lines.		121	D-TM.	,		_			
Catherine (	Cortez	Masto fo	or Sena	te										Ш
ADDRESS (number a	nd street)	8020 South R	ainbow Blvd											Ш
(Check if a is changed		Suite 100-112	<u>.</u>										ı	Ш
is changed	<b>4</b> )	Las Vegas	1 1 1 1 1		1 1 1 1	. 1	NV	1	891	39	, J.	-  ,	ı	
		CITY A					STAT	E 📥			ZIP (	CODE	<b>A</b>	
COMMITTEE'S E-MA	AIL ADDRES	SS												
(Check if a is changed		ccm@mba	acg.com											Ш
	,	Optional Seco	ond E-Mail Add	dress										
														Ш
COMMITTEE'S WEB  (Check if a is changed)	address	, ,	ecortezmasto.cc	om 										
2. DATE 1														
3. FEC IDENTIFIC	CATION NU	MBER ▶	C co	00575548										
4. IS THIS STATEM	MENT	NEW (N)	OR	×	AMENDED	) (A)								
I certify that I have e	examined thi	is Statement a	nd to the best	of my knov	vledge and	belief it i	is true,	correc	t and	compl	ete.			
Type or Print Name	of Treasurer	Snyder, Lili, ,	,											
Signature of Treasure	er <i>Snyder</i> ——	, <i>Lili</i> , , ,		[Ele	ctronically Fi	[led]	Date	1	M /	18	1		22	Y
NOTE: Submission of	false, errone		ete information							oenaltie	s of 5	62 U.S.	C. §3	30109.
Office Use Only				Fed Toll	further informeral Election (Free 800-424-al 202-694-110	Commissio -9530				_	_	<b>RM</b> 1		

Local 202-694-1100

EC Form 1 (Revised 03/2022)	Page <b>2</b>
TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete th information below.)	e candidate
Name of Candidate Cortez Masto, Catherine, , ,	
Candidate Office Party Affiliation DEM Sought: House Senate President	State NV District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the Republican,	
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:
Corporation Corporation w/o Capital Stock Labor O	rganization
Membership Organization Trade Association Coopera	_
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PA	NC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	
(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two of committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
Committees Participating in Joint Fundraiser	
1C	
C	

Treasurer

	_		
	FEC Form 1 (Rev	·	Page 3
V	Vrite or Type Committee		
	Catherine C	Cortez Masto for Senate	
6.		eted Organization, Affiliated Committee, Joint Fundraising Representative, o	r Leadership PAC Sponsor
	Cortez Masto Vid	ctory Fund	
	Mailing Address	611 Pennsylvania Ave SE	
		Suite 143	
		Washington	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Conn	nected Organization Affiliated Organization Joint Fundraising Representation	ve Leadership PAC Sponso
7.	Custodian of Records: books and records.	: Identify by name, address (phone number optional) and position of the person i	n possession of committee
	Mele	e, Steven, , ,	
	Full Name		
	Mailing Address	611 Pennsylvania Ave SE	
		Suite 143	
		Washington DC	20003
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Assistant Treasurer	Telephone number	
8.		me and address (phone number optional) of the treasurer of the committee; a (e.g., assistant treasurer).	and the name and address of
	Full Name Snyd	der, Lili, , ,	
	of Treasurer		
	Mailing Address	8020 South Rainbow Blvd	
		Suite 100-112	
		Las Vegas NV	89139
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		

Telephone number

Mele, Steven,  Mele, Steven,  Mele, Steven,  Agent  Mailing Address    G11 Pennsylvania Ave SE		FEC Form 1	(Revised 02/2009)		Page <b>4</b>
Title or Position  Assistant Treasurer  Telephone number  Telephon		Designated Agent	611 Pennsylvania Ave SE Suite 143 Washington		
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Amalgamated Bank  Mailing Address  I1825 K St NW  Washington  DC 20006  CITY A STATE A ZIP CODE A  Name of Bank, Depository, etc.  Woodsboro Bank  Mailing Address		Title or Position		SIAIE A	ZIP CODE A
Name of Bank, Depository, etc.  Amalgamated Bank  Mailing Address    1825 K St NW		Assistant Treasur	rer Telephone nu	ımber	
Amalgamated Bank  Mailing Address    1825 K St NW	•			tee deposits funds, hold	ds accounts, rents
Mailing Address    1825 K St NW		Name of Bank, D	Depository, etc.		
Name of Bank, Depository, etc.  Woodsboro Bank  Mailing Address  5 N Main Street  Woodsboro  MD 21798		Mailing Address	1825 K St NW  Washington		
Mailing Address    5 N Main Street			CITY A	STATE ▲	ZIP CODE ▲
Mailing Address  5 N Main Street  Woodsboro  MD 21798		Name of Bank, D	Depository, etc.		
Woodsboro MD 21798 —					
		Mailing Address			
CITY ▲ STATE ▲ ZIP CODE ▲			Woodsboro	MD 21798	
			CITY A	STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

or(h). <b>Joint F</b>	Fundraising P	articipant:													
1.							FEC I	D numbe	r (				_		Ξ
2							FEC I	D numbe	r (		Ξ	Ξ			
3.							FEC I	D numbe	r (						
4							FEC I	D numbe	r (		_	_	_		_
Name of Any Co	onnected Org	ganization, Aff	iliated Co	nmittee,	Joint F	undrai	sing Re	presentat	tive,	or Lea	ders	hip F	AC S	pons	or
Nevada Se	enate Vict	ory 2022													
Mailing Ado	dress [	120 Maryland A	venue NE								1 1				
	L														
	1	Washington	1 1 1	1 1 1	1 1	l I		DC		200	002	ı	-	1 1	
Relationshi	ip:		Cl	ΓΥ 🛦				STATE	<b>_</b>		2	ZIP C	ODE	<b>A</b>	
	Connected Or	ganization	Affiliated	Committee	, X	Joint F	unuraisii	ng Represe		/e	Lec	auersi			ns
Designated Age Full Name					-		unuraisii			/e	Lea	adersi			
	nt: Identify by				-						Lea	 			ons 
Full Name	nt: Identify by				-						Lea	 			
Full Name	nt: Identify by				-		undraisii	lg Heprese			Lea	adersi			
Full Name Mailing Addre	nt: Identify by			number –	-		undraisii	STATE A							
Full Name Mailing Addre	nt: Identify by		s (phone i	number –	-	al)	ephone i	STATE A					]-[		
Full Name Mailing Addre	nt: Identify by  ess  Depositories  exponential to the second of the sec	name, addres	s (phone I	number –	optiona	Tele	ephone 1	STATE A			ZII	P CO	] - L		
Full Name  Mailing Addre	nt: Identify by  ess  Depositories  exponential to the second of the sec	name, addres	s (phone I	number –	optiona	Tele	ephone 1	STATE A			ZII	P CO	] - L		
Full Name  Mailing Addre	nt: Identify by  ess  Depositories  exponential to the second of the sec	name, addres	s (phone I	number –	optiona	Tele	ephone 1	STATE A			ZII	P CO	] - L		onso

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ig i ai doipailt.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
Cortez Masto Vic	tory 2022		
	CAA Desperatorie Aug CE		
Mailing Address	611 Pennsylvania Ave SE		
	Ste 143		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee Join  Ty by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)		
esignated Agent: Identif	by by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	cy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited deposit boxes or market deposit boxes or market deposit boxes.	cy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION   anks or Other Depositor	cy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	cy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	cy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h). <b>Joint Fundrais</b>	ing Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Arizona Nevada	2022 Victory Fund		
	∣ 3104 E Camelback Rd		
Mailing Address	#924		
	Phoenix	AZ	85016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connec	ted Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
	Affiliated Committee Joint  Affiliated Committee Joint  tify by name, address (phone number – optional)	runaraising Hepresent	Leadership 1740 opensor
		Fundraising Represent	Leadership 1740 opensor
8. <b>Designated Agent:</b> Iden		Fundraising Represent	Leadership FAO oponsor
8. <b>Designated Agent:</b> Iden		Fundraising Represent	Leadership FAO oponsor
8. <b>Designated Agent:</b> Iden		Fundraising Represent	
8. <b>Designated Agent:</b> Iden	tify by name, address (phone number – optional)	STATE A	
8. <b>Designated Agent:</b> Iden  Full Name   Mailing Address	tify by name, address (phone number – optional)  CITY		
8. Designated Agent: Iden  Full Name  Mailing Address  TITLE OR POSITIO	tify by name, address (phone number – optional)  CITY   Tel  tories: List all banks or other depositories in which t	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

5(g) or (h).	Joint Fundraising	Participant:			
1.			FEC ID	number	С
2			FEC ID	) number	С
3. L			FEC ID	) number	С
4			FEC ID	) number	C
	of Any Connected O	rganization, Affiliated Committee, Jo	oint Fundraising Rep	presentative	e, or Leadership PAC Sponsor
М	ailing Address	120 Maryland Ave NE			
				1 1 1	
		Washington		DC	20002
R	elationship:	CITY ▲		STATE A	ZIP CODE ▲
8. <b>Design</b> a	Connected of the control of the cont	Organization Affiliated Committee  by name, address (phone number – o	X Joint Fundraising	, Representa	tive Leadership PAC Sponsor
Full	Name _   _				
Mail	ling Address				
ТІТ	TLE OR POSITION \	CITY ▲	;	STATE A	ZIP CODE ▲
			Telephone No	umber	
safety d Name o Deposito	leposit boxes or main of Bank, <sub>I</sub>	es: List all banks or other depositories tains funds.	s in which the commit	tee deposits	s funds, holds accounts, rents
		CITY ▲		STATE A	ZIP CODE ▲

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisin</b>			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Illinois Nevada Vid	ctory Fund		
Mailing Address	124 Washington St		
Maining / Mailioso	Ste 101		
	Foxboro	ı ı MA ı	02035
Relationship:	CITY A	STATE ▲	ZIP CODE A
	01112	01/112 2	211 0002 2
	d Organization Affiliated Committee Join Join by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)  CITY	STATE A	Leadership PAC Sp
esignated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or maintenance.	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	ries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundanssan, Murray Victory Fund	raising Representative	e, or Leadership PAC Spon
Mailing Address	1751 Potomac Greens Dr		
	Alexandria	VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
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esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A elephone Number	ZIP CODE A